

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	3		07/20/01
O.I.P.E. CLASSIFIER			8/1/01
FORMALITY REVIEW	SG	1077	8/30/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7-26-01
2	✓	✓	8-1-01
3	✓	✓	8-1-01
4	✓	✓	8-1-01
5	✓	✓	8-1-01
6	✓	✓	8-1-01
7	✓	✓	8-1-01
8	✓	✓	8-1-01
9	✓	✓	8-1-01
10	✓	✓	8-1-01
11	✓	✓	8-1-01
12	✓	✓	8-1-01
13	✓	✓	8-1-01
14	✓	✓	8-1-01
15	✓	✓	8-1-01
16	✓	✓	8-1-01
17	✓	✓	8-1-01
18	✓	✓	8-1-01
19	✓	✓	8-1-01
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44	✓	✓	8-1-01
45	✓	✓	8-1-01
46	✓	✓	8-1-01
47	✓	✓	8-1-01
48	✓	✓	8-1-01
49	✓	✓	8-1-01
50	✓	✓	8-1-01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

Best Available Copy